FORM D RECEIVED 2 9 2006

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL				
OMB Number:	3235-0076			
Expires:				
Estimated averag	e burden			
hours per respons	se 16.00			

360511

SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
l					

	nent and name has changed, and indicate change.)	
\$693,000,000 of Limited Partnership Interes		
Filing Under (Check box(es) that apply):	ule 504 🔲 Rule 505 💟 Rule 506 🔲 Section 4(6)	ULOE
Type of Filing: New Filing Amendmen	nt	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issu	er	06048629
Name of Issuer (check if this is an amendmen	nt and name has changed, and indicate change.)	080400=
RLJ Lodging Fund II, L.P.	· · · · · · · · · · · · · · · · · · ·	
Address of Executive Offices	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
3 Bethesda Metro Center, Suite 1000, Bethe	esda, Maryland 20814	(301) 280-7777
Address of Principal Business Operations	(Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
(if different from Executive Offices)	<i>)</i>	
Brief Description of Business		
Identify potential investments, including focusell, exchange, dispose of or otherwise deal	used service hotels, and acquire, hold, improve, in or exercise control over real property relating	develop, maintain, operate, mortgage, encumber, to or underlying such investments
Type of Business Organization		LUCCE22ED
		please specify):
business trust limit	ted partnership, to be formed	OCT 0 4 2006
	Month Year	
Actual or Estimated Date of Incorporation or Organ		mated THOMSON
	ter two-letter U.S. Postal Service abbreviation for Stat	
<u> </u>	N for Canada; FN for other foreign jurisdiction)	DE
GENERAL INSTRUCTIONS		

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION .

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

Durer the information red	uested for the follo	wing:	vithin the n	ast five vears:				
 Each promoter of the 	e issuer, if the issue	er has been organized w to vote or dispose, or di	vitinii the vo	e or disposition o	f. 10% or	more of a	class	of equity securities of
 Each beneficial own 	er having the power	to vote of dispose, or of corporate issuers and of	Foornorate	general and mana	aging pat	tners of p	artner	ship issuers; and
 Each executive office 	er and director of o	corporate issuers and of	Corporate	Political and war-				
Each general and ma	anaging partner of	partnership issue is.						General and/or
ck Box(es) that Apply:	Promoter	Beneficial Owner	☐ Ex	ecutive Officer	∏ Dı	rector	Ø	Managing Partner
Name (Last name first, if	f individual)		-					
J Capital Partners II, L								
singer or Residence Addres	ss (Number and S	street, City, State, Zip C	Code)					
Bethesda Metro Center	, Suite 1000, Bel	thesda, Maryland 20	1014					
eck Box(es) that Apply:	Promoter	Beneficial Owner	E:	ecutive Officer	Z D	irector		General and/or Managing Partner
ll Name (Last name first, i	f individual)							
obert L. Johnson								
siness or Residence Addre	ss (Number and	Street, City, State, Zip	Code)					
Bethesda Metro Center	, Suite 1000, Bet	hesda, Maryland 20	814					General and/or
neck Box(es) that Apply:	Promoter	Beneficial Owne	r 🔼 🛭	xecutive Officer		irector	لـا	Managing Partner
all Name (Last name first,	if individual)							
homas J. Baltimore, Jr.								
usiness or Residence Addr		Street, City, State, Zip						
Bethesda Metro Cente	r, Suite 1000, Be	thesda, Maryland 20	0814					General and/or
heck Box(es) that Apply:	Promoter	Beneficial Owner	er 🗹 1	Executive Officer	. U ,	Director		Managing Partner
ull Name (Last name first,	if individual)							
loss H. Bierkan								
dusiness or Residence Add	ress (Number and	Street, City, State, Zir	Code)					
3 Bethesda Metro Cent	er, Suite 1000, B			Office		Director		General and/or
Check Box(es) that Apply:	Promoter	Beneficial Own	ier 🔽	Executive Office	r 🗌	Director		Managing Partner
Full Name (Last name first	, if individual)							
Howard B. Isaacson								
Business or Residence Add	iress (Number an	d Street, City, State, Zi	p Code)					
a Bathanda Matra Cani	ter, Suite 1000, E	Bethesda, Maryland				Disector		General and/or
3 Detriesua Metro Cerr	Promoter	Beneficial Own	ner 🗸	Executive Office	er []	Director	L	Managing Partne
Check Box(es) that Apply:								
Check Box(es) that Apply: Full Name (Last name firs	t, if individual)							
Check Box(es) that Apply: Full Name (Last name firs Carl A. Mayfield								<u></u>
	dress (Number an	nd Street, City, State, Z Bethesda, Maryland	ip Code) 20814					
Check Box(es) that Apply: Full Name (Last name firs Carl A. Mayfield	dress (Number an nter, Suite 1000,	Bethesda, Maryland	20014	Executive Office	er 🗍	Director		General and/or Managing Partne
Check Box(es) that Apply: Full Name (Last name firs Carl A. Mayfield Business or Residence Ad 3 Bethesda Metro Cer Check Box(es) that Apply	dress (Number ander, Suite 1000,	Bethesda, Maryland	20014	Executive Offic	eer 🔲	Director		
Check Box(es) that Apply: Full Name (Last name firs Carl A. Mayfield Business or Residence Ad 3 Bethesda Metro Cer	dress (Number ander, Suite 1000,	Bethesda, Maryland	20014	Executive Office	er 🗍	Director		
Full Name (Last name firs Carl A. Mayfield Business or Residence Ad 3 Bethesda Metro Cer Check Box(es) that Apply	dress (Number and nter, Suite 1000, r: Promoter st, if individual)	Bethesda, Maryland Beneficial Ow nd Street, City, State, 2	vner 📝	Executive Offic	eer 📗	Director		

		A. BASIC IDE	ENTIFICATION DATA		
Enter the information req	uested for the follo	owing:			
- Rach promoter of th	e issuer, if the issu	er has been organized wi	ithin the past five years;		
 Each beneficial own 	er having the power	r to vote or dispose, or dir	rect the vote or disposition o	f, 10% or more of a	class of equity securities of the issu
Each executive office	cer and director of	corporate issuers and of	corporate general and mana	aging partners of p	artnership issuers; and
Each general and m					
eck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
il Name (Last name first, if	'individual)				
alifornia Public Employe	es' Retirement	System			
usiness or Residence Addres 00 P Street, Suite 3492,	s (Number and S	Street, City, State, Zip Co	ode)		
heck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
uil Name (Last name first, i					
California State Teachers	s' Retirement Sys	stem			
usiness or Residence Addre	ss (Number and	Street, City, State, Zip C	Code)		
667 Folsom Boulevard, S			E Personalius Offices	Director	General and/or
theck Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Partner
ull Name (Last name first,	if individual)				
New Jersey Common Pe					
weiners or Besidence Addre	es (Number and	Street, City, State, Zip C	Code)		
o Division of Investmen	t, New Jersey D	epartment of the Trea	asury, 50 West State St	reet, 9th Floor, 1	renton, New Jersey 08608
Check Box(es) that Apply:	Promoter	Beneficial Owner		Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Addr	ess (Number and	Street, City, State, Zip (Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Last name first,	if individual)				
Business or Residence Add	ress (Number and	1 Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owne	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first	, if individual)				
Business or Residence Add	ress (Number an	d Street, City, State, Zip	Code)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	er Executive Office	T Director	General and/or Managing Partner
Full Name (Last name first	, if individual)				
Business or Residence Add	iress (Number an	nd Street, City, State, Zip	p Code) .		
	(Use b	plank sheet, or copy and	use additional copies of thi	s sheet, as necessa	ry)

					B. INF	ORMATIO	n about	OFFERING	•				<u> </u>
F4851917.		1955 (S. 19 1955 (S. 1955 (S.						antona in 4	hic affering	, ?		Yes	No
1. H	Has the issuer sold, or does the issuer intend to self, to holf-decreased investor in												
	Answer also in Appendix, Column 2, if filing under ULOE. \$1,000.000												
2. W	2. What is the minimum investment that will be accepted from any individual?									Yes	No		
, r	laar (L	nffarina m	ermit joint (nwnershin	of a single	unit?	***********						Ø
				1 f h	noroon wh	a hae heen	or will be	paid or gi	ven, direct	ly or indir	ectly, any		
c li o a	ommission fapersor or states, l broker o	on or simil n to be liste list the nar or dealer,	ar remuners ed is an asso ne of the bro you may se	ciated personed of the control of th	icitation o on or agen ler. If mor	i purchaser t of a broke e than five	r or dealer (5) persons	registered to be liste	with the SE d are associ	C and/or w	ith a state		
Full N	Name (La	st name fi ners LLC	irst, if indiv	vidual)									
			Address (Nu	ımber and	Street, Cit	y, State, Zi	p Code)						
235 F	Pine Stre	et. Suite	1175, San	Francisco,	California	94104							
Name	of Asso	ciated Bro	oker or Dea	ler									
					Y 1	44 O-1:-!4 D	urahasara						
State	s in Whic	ch Person	Listed Has	Solicited of	or intends	to Solicit P	urchasers				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		States
((Check ".	All States	" or check i	ngividual :	States)	•••••••		****************					
Ϊ	AL	AK	AZ	AR	C/A	ÇO	TQ	DE	DC.	FL	GA	HI	ID
-	V.	IM	M	KS	KY	LA	ME	MD	MA	MI	N/N OK	MS OR	MO
-	MT	NE	NV	MH	INT.	NM V W	NY NY	IXC VA	ND WA	WV	WI	WY	PR
	RI	SC	SD	TN	TX	W	VT	LEAD	(77.73)	دششنا	لعدي		
			first, if indi										
Busi	iness or	Residence	Address (1	Number an	d Street, C	ity, State,	Zip Code)						
Nam	ne of Ass	ociated B	roker or De	aler		•		······································					
State	cs in Wh	ich Person	n Listed Ha	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All State	s" or check	individual	States)			••••••	•••••		••••••		1 States
					CA	[CO]	CT	DE	DC	FL	GA	HI	ID
	[AL]	AK IN	AZ IA	KS	KY	[LA]	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	NJ	NM	NY	NC	ND	OH	OK	OR	PA
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR
Ful			first, if inc	lividual)									
Pue	siness or	Residenc	e Address (Number as	nd Street, 6	City, State,	Zip Code)						
						·							
Nai	me of As	sociated E	Broker or D	ealer									
Sta	tes in W	hich Perso	n Listed H	as Solicited	d or Intend	ls to Solici	Purchaser	·s				<u></u> .	11 04.4
	(Check	"All Stat	es" or chec	k individua	ıl States)				.,	*****************			Il States
	AL	AK	ΑZ	AR	CA	CO	[CT]	DE	DC	FL	GA	HI	ID
	IL	IN	ĪĀ	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT	NE	NV	NH	ИЛ	NM	NY	NC	ND	OH)	OK DVI	OR WY	PA PR
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	(WI)	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

۱.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\) and indicate in the columns below the amounts of the securities offered for exchange and		
	already exchanged.	Aggregate Offering Price	Amount Already Sold
	Type of Security	•	œ
	Debt		\$ \$
	Equity	2	<u> </u>
	Common Preferred	•	\$
	Convertible Securities (including warrants)	. \$	n e 693 000 000.00
	T. T. A. a. a. de	. 3030,000,000.00	<u> </u>
	Total	. \$_000,000,000.0	2 2001001
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	offering and the aggregate dollar amounts of their purchases. For offerings under Rule 304, indea the number of persons who have purchased securities and the aggregate dollar amount of the purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases \$ 693,000,000.00
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		
	Answer also in Appendix, Column 4, if filing under ULOE.	•	
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securit sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to first sale of securities in this offering. Classify securities by type listed in Part C — Question 1		
		Type of Security	Dollar Amount Sold
	Type of Offering	•	\$
	Rule 505		-
	Regulation A		<u> </u>
	Rule 504		s 0.00
	Total	٠٠٠٠	
2	a. Furnish a statement of all expenses in connection with the issuance and distribution of securities in this offering. Exclude amounts relating solely to organization expenses of the insurance information may be given as subject to future contingencies. If the amount of an expenditure not known, furnish an estimate and check the box to the left of the estimate.	re is	□ \$
	Transfer Agent's Fees	L	24 600 00
	Printing and Engraving Costs	[577 111 00
	Level Fore	,	24 234 00
	Accounting Rees		
	Engineering Fees	***************************************	\$ 3,029,253.00
	Sales Commissions (specify finders' fees separately)		- ^
	Other Expenses (identify)		\$\$ Z \$_3,655,288.00
	Total	*******	S 3,000,200.00

	C: OFFERING PRICE, NUMBE	R OF INVESTORS, EXPENSES AND USE OF PI	ROCEEDS	2.00
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Qu proceeds to the issuer."	estion 4.a. This difference is the "adjusted gross		\$ <u>689,344,712.00</u>
5.	Indicate below the amount of the adjusted gross proceed each of the purposes shown. If the amount for any purposes the box to the left of the estimate. The total of the proceeds to the issuer set forth in response to Part C	purpose is not known, furnish an estimate and e payments listed must equal the adjusted gross		
	,		Payments to	
			Officers,	
			Directors, & Affiliates	Payments to Others
	Salaries and fees	[] \$	
	Purchase of real estate			
	Burchage rental or lessing and installation of machi	nerv		
	and equipment	[\$	
	Construction or leasing of plant buildings and facili	tics[] \$	- 🗆 \$
	Acquisition of other businesses (including the value offering that may be used in exchange for the assets issuer pursuant to a merger)	of securities involved in this		
	Repayment of indebtedness		 □\$	
	Working capital			
	Other (specify): Invest in hotel properties and open	erate the fund		\$ 689,344,712.0
			ГT\\$	_ □\$
	Column Totals			
	Total Payments Listed (column totals added)		_	89,344,712.00
100	- Williams	D. FEDERAL SIGNATURE		
	ne issuer has duly caused this notice to be signed by the uspature constitutes an undertaking by the issuer to furne information furnished by the issuer to any non-accre	indersigned duly authorized person. If this notic ish to the U.S. Securities and Exchange Commi	e is filed under R ssion, upon writt	ule 505, the following
F	suer (Print or Type) ILJ Lodging Fund II, L.P. by ILJ Capital Partners II. LLC. its General Partner	Signature	Date September <u>2</u> 8	, 2006
	ame of Signer (Print or Type)	Title of Signer (Print or Type)	,	
•	Thomas J. Baltimore, Jr.	President		

Thomas J. Baltimore, Jr.

- ATTENTION -

intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

	E. STATE SIGNATURE	n e	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No 🔀
	See Appendix, Column 5, for state response.		

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type) RLJ Lodging Fund IL LP. by	Signature Date September $\frac{\partial \ell}{\partial t}$, 2006
RI.IC and a Partners II IIC to General Partner. Name (Print or Type)	Title (Print or Type)
Thomas J. Baltimore, Jr.	President

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

UNIFORM CONSENT TO SERVICE OF PROCESS

KNOW ALL MEN BY THESE PRESENTS:

That the undersigned, RLJ LODGING FUND II, L.P. a limited partnership organized under the laws of the state of Delaware, for the purpose of complying with the laws of the State of Virginia relating to either the registration or sale of securities, hereby irrevocably appoints the Clerk, State Corporation Commission of the State of Virginia, and the successors in such office, its attorney in the State of Virginia upon whom may be served any notice, process or pleading in any action or proceeding against it arising out of or in connection with the sale of securities or out of violation of the aforesaid laws of said State; and the undersigned does hereby consent that any such action or proceeding against it may be commenced in any court of competent jurisdiction and proper venue within the State of Virginia by service of process upon said officer with the same effect as if the undersigned was organized or created under the laws of the state of Virginia and had lawfully been served with process in that State.

It is requested that a copy of any notice, process or pleading served hereunder be mailed to:

RLJ LODGING FUND II, L.P.
3 Bethesda Metro Center, Suite 1000
Bethesda, Maryland 20814
Attention: Thomas J. Baltimore, Jr., President

CORPORATE SEAL	Ву:	RLJ LODGING FUND II, L.P. RLJ CAPITAL PARTNERS II, LLC, GENERAL PARTNER
(If no seal, please so indicate NO SEAL)	Ву:	Thomas J. Baltimore, Jr., President
	ACKNOW	/ /LEDGEMENT
•		

STATE OF MARYLAND) ss.:
COUNTY OF MONTGOMERY)

On this ______ day of September, 2006, before me personally came Thomas J. Baltimore, Jr., to me known, who being by me duly sworn, did depose and say that he is the President of RLJ Capital Partners II, LLC, the General Partner of RLJ Lodging Fund II, L.P., and that he is authorized to and did execute the foregoing Designation for and on behalf of such limited partnership.

SEP 2 9 2006

PAMELA PETTY
Notary Public-Maryland
Montgomery County
My Commission Expires
March 21, 2010